## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000052913 (5)

OZROC RESOURCES, INC.

**FILED** Jul 06 1998 8:00am Secretary of State



						<b>a</b> nka ((212 kale) 1(200 kn)) kadi
Principal Place of Business Mailing Address				······································	I ORDITORI IID INTEL LODUS ODIUS ODIUS ODIUS ODIUS DOISE	BEITEN GENIN INIDI ETNEN IIII INDI
9220 CALUSA CLUB DRIVE WEST 9220 CALUSA CLUB DRIV						
MIAMI FL 33186 MIAMI FL 33186					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
	•				06/16/1997	
2. Principal Place of Business 2a. Mailing Address			s		4. FEI Number 65-0836493	Applied For
21		26			63-0836493	Not Applicab
Suite, Apt.	#, etc.	Suite, Apt. #, et	} <del>-</del> -1		5. Certificate of Status Desirod	\$8.75 Additional Fee Required
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zφ	Coun	try	8. This corporation owes or has paid the	··
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of C	urrent Registered Agent			10. Name and Address of New Register	ed Agent
DWYER, MICHAEL W				1 Name		
598	5 SOUTHWEST 8TH STREE	T	E	2 Street Add	iress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33144			_			
			8	3		
			6	4 City		85 Zip Code
				J	poration submits this statement for the purpos attion's board of directors. I hereby accept the	L 85 Zip Code
SIGNATURE	Signature, typied or printed harrie of register OFFICERS	red agont and title if applicable S AND DIRECTORS	(NOTE Registered A	igent signature requ	ored whon reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	<u>`</u>
TITLE	PRESIDENT	DELF			ADDITIONO/OFFICINGED TO OFFICE NO.	Change Addition
NAME	MARIA COR	128	1.2 NAM	[		
STREET ADDRESS	927.0 CALL	ISA DR. W.	1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAML PC	- 33/86	1.4 City	- ST - ZIP		
THLE	MIAML PC VICE PRESIDO	し <b>ル</b> ア □ DELE	IE 2.1 NILE			Change Addition
NAME	GRNEST C	OKTO	2.2 NAM	f		
STREET ADDRESS	9220 CALUS	A DR.W.		ET ADDRESS		
CATY-ST-ZIP TITLE	MIAMI, FO	33/86   DELF		'- S1 - ZIP		Change Additio
NAME		0	32 NAM	- 1		
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP			3.4 CITY	-ST-ZIP		
TITLE		DELE	IE 41 TITE			Change Additio
NAME			4. 2 NAN	IE		
STREET ADDRESS			4.3 STRE	et address		
CITY-ST-ZIP			4,4 CITY			F16 F1440.
TALE		☐ DETE	<b>a</b> .			Change Additio
NAME			5.2 NAM			
STREET ADDRESS				E1 ADDRESS		
CITY-ST-ZIP TITLE		DELET	5.4 CITY E 6.1 THUE			Change Additio
NAME		I_1 Detec	6.2 NAM	- 1	9000025814	
STREET ADDRESS				ET ADDRESS	-07/07/9801051	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.